
APPLICATION DATA SHEET UNDER 37 C.F.R. §1.76

Inventor Information

Inventor One Given Name: **David**
Family Name: **Alsop**
Postal Address: **29 Wheeler Road**
City: **Newton**
State or Province and Postal Code: **MA 02459**
Country **United States of America**
Citizenship: **United States of America**

Correspondence Information

Name Line One: **James H. Morris**
Name Line Two: **Wolf, Greenfield & Sacks, P.C.**
Address Line One: **Federal Reserve Plaza**
Address Line Two: **600 Atlantic Avenue**
City: **Boston**
State or Province and Postal Code: **Massachusetts 02210**
Telephone: **617-720-3500**
Fax: **617-720-2441**
E-mail: **jmorris@wolfgreenfield.com**

Application Information

Title: **ARTERIAL SPIN LABELING USING TIME VARYING GRADIENTS**
Total Drawing Sheets: **11**
Formal Drawings? **Yes**
Application Type: **Non-Provisional Utility**
Art Unit: **Unknown**
Docket Number: **B0662.70046US01**

Representative Information

Representative Customer Number:: 23628

Continuity Information

Attorney Docket No.: B0662.70046US01
Express Mail Label No. EV 292462320 US
Date: March 9, 2004

This application is a: Non-provisional
Claiming priority to: Non-Provisional application docket no. B0662.70046US00
Serial Number: 10/121,963
Filing Date: April 12, 2002
Status: Allowed

Prior Foreign Applications

Foreign Application Number:
Filing Date:
Country:
Priority Claimed:

Assignee Information (when available)

Name of Assignee: Beth Israel Deaconess Medical Center, Inc.
Address: 330 Brookline Avenue, Boston, Massachusetts 02215